CLEMENT MANOR HEALTH CARE CENTER

3939 SOUTH 92ND STREET

GREENFIELD 53228	Phone: (414) 321-1800		Ownership:			
Operated from 1/1 To 12/3	1 Days of Operation:	365	Highest Level License:	Skilled		
Operate in Conjunction with	Hospital?	No	Operate in Conjunction with CBRF?	No		
Number of Beds Set Up and S	taffed (12/31/05):	166	Title 18 (Medicare) Certified?	Yes		
Total Licensed Bed Capacity	(12/31/05):	166	Title 19 (Medicaid) Certified?	Yes		
Number of Residents on 12/3	1/05:	155	Average Daily Census:	159		

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	8	Age Groups	8	Less Than 1 Year   1 - 4 Years	36.1 45.8
Developmental Disabilities	0.0	Under 65	0.6	More Than 4 Years	18.1
Mental Illness (Org./Psy)	28.4	65 - 74	4.5		
Mental Illness (Other)	0.0	75 - 84	30.3		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	52.3		
Para-, Quadra-, Hemiplegic	0.6	95 & Over	12.3	Full-Time Equivalent	
Cancer	3.2			Nursing Staff per 100 Resid	ents
Fractures	9.7		100.0	(12/31/05)	
Cardiovascular	22.6	65 & Over	99.4		
Cerebrovascular	12.9			RNs	11.8
Diabetes	2.6	Gender	8	LPNs	9.9
Respiratory	1.3			Nursing Assistants,	
Other Medical Conditions	18.7	Male	25.2	Aides, & Orderlies	43.7
		Female	74.8	j	
	100.0	j		j	
			100.0	j	

## Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other		Ī	Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	4	5.6	149	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	2.6
Skilled Care	23	100.0	373	64	88.9	127	0	0.0	0	57	95.0	214	0	0.0	0	0	0.0	0	144	92.9
Intermediate				4	5.6	105	0	0.0	0	3	5.0	195	0	0.0	0	0	0.0	0	7	4.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	23	100.0		72	100.0		0	0.0		60	100.0		0	0.0		0	0.0		155	100.0

CLEMENT MANOR HEALTH CARE CENTER

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
beachs builing Reporting Period					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	4.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	6.5		70.3	23.2	155
Other Nursing Homes	4.5	Dressing	5.2		74.8	20.0	155
Acute Care Hospitals	86.4	Transferring	22.6		60.6	16.8	155
Psych. HospMR/DD Facilities	0.0	Toilet Use	18.7		67.1	14.2	155
Rehabilitation Hospitals	2.3	Eating	58.1		28.4	13.5	155
Other Locations	0.6	*******	******	*****	*****	*******	*****
Total Number of Admissions	176	Continence		용	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	7.1	Receiving Resp	iratory Care	1.9
Private Home/No Home Health	18.8	Occ/Freq. Incontiner	nt of Bladder	61.3	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	6.6	Occ/Freq. Incontiner	nt of Bowel	43.2	Receiving Suct	ioning	0.6
Other Nursing Homes	2.2	İ			Receiving Osto	my Care	1.3
Acute Care Hospitals	11.6	Mobility			Receiving Tube	Feeding	2.6
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.2	Receiving Mech	anically Altered Diets	33.5
Rehabilitation Hospitals	0.0	<u> </u>					
Other Locations	0.6	Skin Care			Other Resident C	haracteristics	
Deaths	40.9	With Pressure Sores		5.2	Have Advance D	irectives	98.7
Total Number of Discharges		With Rashes		0.6	Medications		
(Including Deaths)	181	İ			Receiving Psyc	hoactive Drugs	62.6

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	his Nonprofit			-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.8	87.0	1.10	84.6	1.13	86.5	1.11	88.1	1.09
Current Residents from In-County	99.4	87.6	1.13	87.4	1.14	84.9	1.17	77.6	1.28
Admissions from In-County, Still Residing	31.8	19.2	1.66	17.0	1.87	17.5	1.82	18.1	1.76
Admissions/Average Daily Census	110.7	172.6	0.64	221.6	0.50	200.9	0.55	162.3	0.68
Discharges/Average Daily Census	113.8	175.8	0.65	225.9	0.50	204.0	0.56	165.1	0.69
Discharges To Private Residence/Average Daily Census	28.9	73.1	0.40	100.1	0.29	86.7	0.33	74.8	0.39
Residents Receiving Skilled Care	95.5	97.8	0.98	97.0	0.98	96.9	0.99	92.1	1.04
Residents Aged 65 and Older	99.4	96.5	1.03	90.1	1.10	90.9	1.09	88.4	1.12
Title 19 (Medicaid) Funded Residents	46.5	48.9	0.95	55.5	0.84	55.0	0.84	65.3	0.71
Private Pay Funded Residents	38.7	31.3	1.24	21.9	1.77	22.5	1.72	20.2	1.92
Developmentally Disabled Residents	0.0	0.4	0.00	1.2	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	28.4	31.3	0.91	28.6	0.99	31.0	0.92	32.9	0.86
General Medical Service Residents	18.7	27.9	0.67	30.3	0.62	26.5	0.71	22.8	0.82
Impaired ADL (Mean)	47.7	51.5	0.93	52.9	0.90	52.3	0.91	49.2	0.97
Psychological Problems	62.6	62.4	1.00	56.3	1.11	58.3	1.07	58.5	1.07
Nursing Care Required (Mean)	5.7	7.0	0.82	6.9	0.83	7.3	0.79	7.4	0.77